FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30014** **(5)**

1. Corporation Name
MARINE MIDLAND MORTGAGE CORPORATION

Principal Place of Business
ATTN: DEBRA S. KELLER
2929 WALDEN AVENUE
DEPEW NY 14043
US

Mailing Address
ATTN: DEBRA S. KELLER
2929 WALDEN AVENUE
DEPEW NY 14043
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/29/1990

2. Principal Place of Business
21 2929 Walden Avenue
Suite, Apt. #, etc
22 Att: Elizabeth Hofmeister
City & State
23 Depew, New York
Zip 24 14043 Country 25 US

2a. Mailing Address
26 2929 Walden Avenue
Suite, Apt. #, etc
27 Att: Elizabeth Hofmeister
City & State
28 Depew, New York
Zip 29 14043 Country 30 US

4. FEI Number
~~15-1245395~~ 16-1245395 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of the person signing this report. Required. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROTH, ROBERT E 1MM CENTER-14TH FLOOR BUFFALO NY 14203-2827	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P/D Roth, Robert E. 2929 Walden Avenue Depew, NY 14043	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TOOHEY, PHILIP S ONE SMOKES CREEK ROAD ORCHARD PARK NY	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	S/D Toohey, Philip S. One Marine Midland Center, 24th floor Buffalo, New York 14203	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MEYER, JOSEPH M 231 TIMBERLINE DR GRAND ISLAND NY	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	T/V Meyer, Joseph M. 2929 Walden Avenue Depew, NY 14043	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DINTINO, DNIEL 1MM CENTER-14TH FLOOR BUFFALO NY 14203-2827	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	V Dintino, Daniel 2929 Walden Avenue Depew, NY 14043	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVIDSON, PETER 1MM CENTER-14TH FLOOR BUFFALO NY 14203-2827	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	V Hunter, David J. 2929 Walden Avenue Depew, NY 14043	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MILLER, JEFFREY P 251 MAIN ST-STANTON BLDG BUFFALO NY 14202	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	V Wojnar, Susan A. 2929 Walden Avenue Depew, NY 14043	☐ Change ☒ Addition

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan A. Wojnar April 17, 1998 716-651-6473